

Approved Foreign Administrator

Application Form



FINANCIAL SERVICES AUTHORITY

Bois De Rose Avenue
P.O. Box 991
Victoria
Mahé
Seychelles

Tel: +248 4380800
Fax: +248 4380888
Website: www.fsaseychelles.sc
Email: enquiries@fsaseychelles.sc

Approved Foreign Administrator – Application Form

(Version 3.0)

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Instructions for completing the application form

- Applicants are advised to refer to the Mutual Fund and Hedge Fund Act, 2008 when completing the application form.
- The form should be completed in English and the answers to ALL questions should be TYPED or written in INK and in BLOCK LETTERS.
- No question should be left unanswered. Where the Applicant believes that a question does not apply, the Applicant should write “**Not Applicable**” or “**N/A**”.
- If there is insufficient space to answer a question, additional information may be provided on an attachment page and identify the continuation of an answer by stating the question number.
- The declaration on this form must be signed by a director or other duly authorised person.
- If there are any changes in the information furnished in the application prior to the completion of the review of this application, the Authority should be notified immediately.
- This application form must be accompanied by:
 - a. The prescribed fee payable by (i) swift transfer or (ii) bankers’ cheque in favour of the Financial Services Authority (FSA)
 - b. Personal Questionnaire Forms completed by each director, shareholder and beneficial owner of the applicant (unless the relevant party is listed on a stock exchange in a recognised jurisdiction).
 - c. Certified copy of current valid licence or other authorisation to conduct mutual fund administration issued under the laws of a Recognised Jurisdiction
 - d. Certificate of good standing of the applicant from an Overseas Regulatory Authority in a Recognised Jurisdiction
- Categories of Acceptable Certifiers (the certifier must be independent from the applicant):
 - (i) a judge; (ii) a magistrate; (iii) a notary public; (iv) a barrister-at-law; (v) a Solicitor; (vi) an attorney-at-law; or (vii) a Commissioner of Oaths.
- The completed application form and other supporting documents, should be submitted to:

**The Managing Director
Financial Services Authority
P.O BOX 991
Roche Caiman, Mahé
Republic of Seychelles**
Attn: Funds and Investment Section

NOTE: Failure to disclose and submit all necessary information may lead to the Authority rejecting the application

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SECTION ONE: DETAILS OF THE APPLICANT

1. Name of Applicant

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2. Details of contact person for the purposes of the application

Name	
Address	
Telephone No.	
Fax No.	
E-mail	

3. Details of Registered Office Overseas and Principal Place of Business Overseas

	Registered Office Overseas	Principal Place of Business Overseas
Address		
Telephone No.		
Fax No.		
E-mail		

4. Details of the Auditor

Name	
Address	
Telephone No.	
Fax No.	
E-mail	

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5. Details of Directors

	Director 1	Director 2
Name		
Address		

6. Details of Shareholders and Beneficial Owners¹

	Shareholder 1	Shareholder 2
Name		
Address		
	Name and address of each Beneficial Owners if Shareholder 1 is a nominee or non-individual	Name and address of each Beneficial Owners if Shareholder 2 is a nominee or non-individual

¹ Indicate if the applicant or its controlling shareholder or beneficial owner are listed on a stock exchange in a recognised jurisdiction

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SECTION TWO: OPERATION OF APPLICANT

1. Details of current overseas licensing or registration as a mutual fund administrator

Type of fund administrator licence or authorisation issued	
Place and date of issue	
Licence/Registration No.	

2. Details of the overseas regulatory body issuing the above licence or authorisation

Name	
Address	
Telephone No.	
Fax No.	
E-mail	

3. Details of all past overseas licensing or registration as a mutual fund administrator (i.e. place and date of issue, type of licence or authorisation issued)

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4. Other Information

Please state if you already administer overseas mutual funds or collective investment schemes and, if so how many and what is the approximate total net asset value of such funds.	
Please state your estimate of the total number of Seychelles licensed mutual funds you anticipate administering in the next 3 years.	

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DECLARATION

(by director or other duly authorised person for and on behalf of the applicant)

I declare that to the best of my knowledge, information and belief the information provided above and in the accompanying documents is true and correct.

Signed:

Name:

Position held:

Date:

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Checklist

Below is a checklist which has been designed to assist applicants to ensure that all of the information required by FSA is submitted when making an application for an Approved Foreign Administrator under the Mutual Fund and Hedge Fund Act, 2008. This checklist is to serve only as a guide. The Authority may contact the applicant should it require further information.

1. All blank spaces in the Application Form has been filled in.	<input type="checkbox"/>
2. Payment of the application fee (i.e. US\$ 1,000) has been made or attached.	<input type="checkbox"/>
3. Personal Questionnaire Forms completed by each director, shareholder and beneficial owner of the applicant (unless the relevant party is listed on a stock exchange in a recognised jurisdiction).	<input type="checkbox"/>
4. Certified copy of current valid licence or other authorisation to conduct mutual fund administration issued under the laws of a Recognised Jurisdiction has been attached.	<input type="checkbox"/>
5. Certificate of good standing of the applicant from an Overseas Regulatory Body has been attached.	<input type="checkbox"/>
6. The certifier of any attached document is an acceptable certifier in accordance with page 2 of this Application Form	<input type="checkbox"/>